

PTO/SB/21 (08-03)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/056,121	<b>RECEIVED</b>
Filing Date	January 23, 2002	<b>CENTRAL FAX CENTER</b>
First Named Inventor	Wellinghoff, et al.	
Art Unit	1625	<b>SEP 15 2005</b>
Examiner Name	Taylor V. Oh	
Total Number of Pages in This Submission	4	Attorney Docket Number
		SWRI-2835-07 (previously SWRI-2835-04)

Total Number of Pages in This Submission

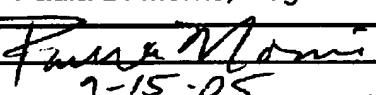
**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	1. Form PTO/SB/08A; and
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement	<input type="checkbox"/> Request for Refund	2. Credit Card Payment Form PTO-2038.
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

**Remarks**

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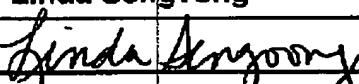
**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Paula D. Morris, Reg. No. 31,516
Signature	
Date	7-15-05

**CERTIFICATE OF TRANSMISSION/MAILING**

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**FACSIMILE No.: (571) 273-8300 (GENERAL)**

Typed or printed name	Linda Sengvong
Signature	
Date	9-15-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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CENTRAL FAX CENTER

SEP 15 2005

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

<b>Applicant:</b>	<b>Wellinghoff, et al.</b>	<b>Group Art Unit:</b>	<b>1625</b>
<b>Serial No.:</b>	<b>10/056,121</b>	<b>Examiner:</b>	<b>Taylor V. Oh</b>
<b>Filed:</b>	<b>01/23/2002</b>	<b>Atty. Docket No.:</b>	<b>SwRI-2835-07</b>
<b>Title:</b> Novel Mesogens			

**MAIL STOP AMENDMENT**

Commissioner for Patents  
PO BOX 1450  
Alexandria, VA 22313-1450

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

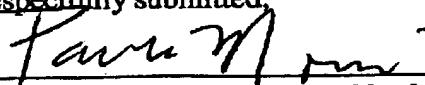
Dear Sir:

In compliance with the duty of disclosure under 37 C.F.R. § 1.56, it is respectfully requested that this Supplemental Information Disclosure Statement be entered and the references listed on the attached Form PTO/SB/08A be considered by the Examiner and made of record.

This Supplemental Information Disclosure Statement is not to be considered as a representation that a search has been made or that no other material information as defined under 37 C.F.R. § 1.56 exists.

We hereby authorize the Commissioner to charge our credit card as indicated on form PTO-2038, for the amount of \$180.00 as required under 37 CFR 1.17(p). The Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 50-0997 (SWRI-2835-07), maintained by Paula D. Morris & Associates, P.C. d/b/a The Morris Law Firm, P.C..

Respectfully submitted,

  
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 The Morris Law Firm, P.C.  
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Substitute for form 1449/PTO

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

*(Use as many sheets as necessary)*

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Application Number	10/056,121
Filing Date	01-23-2002
First Named Inventor	Wellinghoff
Art Unit	1623
Examiner Name	Killos
Attorney Docket Number	SwRI-2835-07

<b>Examiner Signature</b>		<b>Date Considered</b>	
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<sup>1</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>2</sup>Applicant's unique citation designation number (optional). <sup>3</sup>See Kinds Code of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 801.04. <sup>4</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>5</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>6</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>7</sup>Applicant is to place a check mark here if English language Translation is attached.

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